RHODE ISLAND BOARD OF NURSE REGISTRATION AND NURSING EDUCATION
MINUTES OF MEETING
OPEN SESSION
July 11, 2011

The Open Session of the Rhode Island Board of Nurse Registration and Nursing Education was called to order at 8:30 am on the above date in room 401 of the Department of Health, Three Capitol Hill, Providence, Rhode Island, pursuant to the applicable provisions of the Open Meetings Law, so called, and other applicable sections of the General Laws of the State of Rhode Island as amended.

RHODE ISLAND BOARD OF NURSE REGISTRATION AND NURSING
Cristiana Rosa, MS, RN, PCNS
Linda Twardowski, RN,MS
Jeannine Borozny, RN
Kristen Young, RN
Manuela Raposo
Linda Damon, RN,MS
Michelle Cahill, LPN
Anne Tierney, RN, CRNA, Secretary
Joslin Leasca, RN, MS, RNP, President
Michael Gerhardt

Sandra Mergerdichian, RN, MS Vice President

ABSENT BOARD MEMBERS
Genevieve Rodrigues, LPN

Peggy Matteson, RN, PhD

Carol Cairns RN, MS

# STAFF MEMBERS IN ATTENDANCE

Pamela McCue, RN, MS Director

Linda TetuMouradjian, RN, MS Compliance Officer

### 1. ESTABLISHMENT OF A QUORUM

President Leasca, called the meeting to order at 8:30 am. A quorum was established at this time.

# 2. PRESENTATION OF MINUTES OF OPEN SESSION OF April 11, 2011

On motion of Ms Borozny, and seconded by Ms Twardowski, it was unanimously voted to accept the minutes of June 13, 2011 with the following amendments:

The minutes approved at that meeting were from May 9, 2011

# 3. PRESIDENT'S REPORT -

Ms Leasca thanked the Board for their assistance and collaboration during her time as President. Ms Matteson will be beginning her presidency in September.

# 4. DIRECTOR'S REPORT-

The past month has brought a high volume of nursing applications seeking NCLEX testing and initial licensure. Also the nursing assistance renewal period was during this month, thus staff resources were directed to these activities since last meeting.

NCSBN submitted an Amicus Brief on behalf of the California Board of Registered Nursing regarding a long standing case involving the California Department of Education and the American Diabetes Association's desire to change the CA Nurse Practice Act to allow unlicensed school personnel to administer insulin to students. NCSBN is clearly in opposition of this.

### 5. OLD BUSINESS-

a. Hearing on the proposed Nursing Regulations

Ms McCue presented to the board amended language proposed by the education sub-committee based on the discussion at the June 13 Board meeting.

# The proposed language:

1.37 "Preceptor" an experienced practitioner at or above the level of licensure that an assigned student is seeking who facilitates a student's clinical learning experience acting as a role model and mentor in the preceptor's area of practice expertise under the guidance of an assigned a specified nursing faculty member who holds a current, active, unencumbered Rhode Island RN license or privilege to practice issued pursuant to the Act and these

Regulations.

- (3) Preceptors. Clinical preceptors shall possess a current, active, unencumbered RN license or privilege to practice issued pursuant to the Act and these Regulations
- (i) Clinical preceptors are academically and experientially qualified which includes educational preparation of participation in a mentoring program the role of the for preceptors, so each is prepared in to assisting in the achievement of achieving the mission, goals and expected student outcomes from the experience.
- (ii) Clinical preceptors shall be licensed as a nurse at or above the level for which the student is preparing.
- (iii) The assigned nurse faculty member responsible for working with the preceptor and student may seek input from the

designated preceptor regarding student performance but ultimately the this nurse faculty member is responsible for evaluation of individual student learning outcomes.

Discussion ensured regarding the proposed language. Several Board members spoke in support of preceptors and relayed their positive experiences both as students and functioning as preceptors. Ms Costigan, faculty at CCRI expressed concerns that the language does not provide enough specifics and would like to see the Board include language in the regulations "when a preceptor can be utilized, how a preceptor should be utilized and who should be a preceptor. She expressed concern that preceptors would be used in the acute care

setting. Ms Policastro, Executive Director RISNA stated the Board should not be involved in policy but regulation and to be too specific could cause barriers. Ms Policstro also suggested adding language that students need to have direct access to faculty when preceptors are being utilized. Discussion involved the contractual agreements between the schools of nursing and the health care facility that those documents dictate the legal responsibilities and accountability of each entity to ensure a safe patient experience. Further discussion included the required "preceptor training" that the proposed regulations include and that it should be the school of nursing's responsibility to provide this. Ms Policastro informed the Board that ANCC is developing a certification for preceptors that should prove to be useful. Ms Costigan proposed to the Board that they should require all preceptors to have masters degrees.

Ms McCue offered that this topic be tabled for this meeting and for those with concerns it would be appreciated for them to submit proposed language to be reviewed at the September meeting.

The following proposed language was discussed

- (2) Adjunct clinical faculty employed solely to supervise clinical nursing experiences of students shall:
- (i) Meet all the faculty qualifications for the program level, as defined by

these Regulations

(ii) Possess a current, active, unencumbered RN license or privilege

to practice issued pursuant to the Act and these Regulations

(iii) In an emergent situation, the Chief Academic Officer of a nursing program may request a waiver from the Board to hire a specific person to fill a

specific position for a specified period of time.

On motion of Ms Raposo, seconded by Ms Cahill, this language was unanimously approved.

The following proposed language was discussed

16.1

(c) (c) Include clinical experiences in the episodic and distributive areas of nursing practice in health care facilities providing the specialized clinical nursing service(s). Mutual agreements with cooperating agencies and/or institutions or facilities shall be developed and shall clearly delineate the terms of the agreement which shall be reviewed periodically and revised as may be necessary which demonstrate active participation in THE central clinical placement registry; and

On motion of Ms Borozny, seconded by Ms Megerdichian the language was unanimously approved.

The following language wa proposed 15.1 (h)

h) the philosophy, purposes and accreditation status of the controlling institution and the major facilities to be used for clinical laboratory experience;

16.1 (e) An approved program shall be required to obtain and maintain accreditation of the nursing program by a national nursing accrediting body acceptable to the Board

On motion of Ms Rose, seconded my Ms Megerdichian, the language was unanimously approved.

### 6. ANNOUNCEMENTS

Ms Policastro informed the board of the following RISNA activities

- RNINI Middle College Charter School was approved by the Board of Regents with 5 years of funding. Beginning in September of this year, 10 and 11th grade students will begin. An open house is scheduled for August 29th at 11am and the Board will be invited.
- On September 23rd RISNA will be sponsoring a workshop on the topic of substance abuse in nursing.
- The General Assembly passed the legislation requiring FBI finger printing on all initial applicants for nursing licenses.
- RISNA will be convening a task force on the APRN Consensus Model. Ms McCue requested that the Board be invited to sit on this which Ms Policastro agreed.

### 7. ADJOURNMENT TO EXECUTIVE SESSION

On motion of Ms. Borozny, seconded by Ms. Megerdichian, it was unanimously voted to move into Executive Session pursuant to 42-46-4 and 42-46-5(1) of the Rhode Island General Laws for the discussion of job performance, character, physical or mental health of applicants for licensure and licensees and for discussion of investigatory proceedings relating to misconduct by applicants licensure and licensees, and investigatory proceedings regarding allegations of civil or criminal misconduct. The Open Session adjourned at 10:20am

### 8. RETURN TO OPEN SESSION

President Leasca called the Open Session back to order 12:45pm

9. VOTE TO SEAL MINUTES OF EXECUTIVE SESSION PURSUANT TO SECTIONS OF 42-46-5 OF THE RHODE ISLAND GENERAL LAWS On motion of Ms Borozny, seconded by Ms Rosa, it was unanimously voted to keep confidential all matters discussed in the Executive Session and to seal those minutes in as much as fitness for licensure and ongoing disciplinary matters were addressed.

### 10. PRESENTATION OF FINAL ACTIONS

Joseph Norato, RN release form probation

The following cases were voted a finding of no unprofessional conduct

RN11-040

PN11-051

RN11-041

RN11-042

# 11. ADJOUNTMENT

On motion of Ms Borozny, seconded by Ms Twardowski, it was unanimously voted to adjourn at 1:15pm

Respectfully submitted by Anne Tierney, CRNA